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15. Supplementary Notes
The CHER performed this study in collaboration with the Health Policy Research Consortium, Brandeis University. See associated NTIS reports PB93-112753 "Integrating Results of Physician Practice Cost Surveys"; and PB93-XXXXXX "Assessment of Physician Practice Cost Data Needs".

16. Abstract (Limit: 200 words)
This report provides an inventory of data sources relevant to the economics of physician practice. It provides a listing and brief description of selected data sources. Physician economics is defined as issues relating to productivity, fees, practice revenue, practice expenses, net income, payor mix, billing practices, and demographics. The inventory includes abstracts for a total of 30 data sources, representing different sponsors. Three major data collectors represented are: (1) Federal Government (2) Medical Societies, and (3) other sources, e.g. physician recruitment firms and practice management consultants. Data sources include both episodic and regularly collected periodic surveys of both cross section and time series nature. Methodology reports, survey questionnaire, sample tabulations and other published material were obtained from each of the data source sponsors. Each abstract contains seven basic types of information which are (1) description, (2) data years, (3) survey elements, (4) response rate, (5) accessibility, (6) contact person, and (7) references.
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INVENTORY OF
PHYSICIAN PRACTICE COST DATA SOURCES

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In cooperation with

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Center for

Health Economics Research

Urban Institute

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ACKNOWLEDGEMENTS

This inventory would not have been possible without the cooperation and support of data source sponsors, HCFA staff, and other CHER staff. We would like to thank all of the sponsors that helped us understand the selected data sources - or directed us to other data sources. Of course, any errors of omission or commission are the responsibility of the authors.

We would like to thank Nancy McCall, Sherry Terrell, and Mark Freeland at HCFA for their data source ideas in the early stages of this project.

We would also like to thank Philip W. Tyo and Sharron J. Bell for their production support throughout the project.

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INTRODUCTION

The Health Care Financing Administration (HCFA) relies on physician data for multiple policy and research objectives. Physician practice cost and income data are used to update the Medicare Economic Index (MEI) and the Geographic Practice Cost Index (GPCI), both important elements in the determination of physician reimbursement. In addition, data on physician practice characteristics and costs have enabled researchers and policy makers to better understand the complexities of medical practice. With the phase-in of the Medicare Fee Schedule in 1992, HCFA's needs for accurate physician data will extend beyond MEI and GPCI updates and refinements. Additionally, the impacts of the fee schedule on physicians will need to be assessed.

Currently, HCFA requires a coordinated effort to assess its current and future data needs, evaluate the data sources that can be used to meet current data needs, and develop data strategies to meet future data needs. Under a Cooperative Agreement with HCFA, the Center for Health Economics Research (CHER) is conducting such a study. This report provides an inventory of data sources relevant to the economics of physician practice.

GUIDE TO USERS

Scope. The overall goal of the inventory is to provide a list and brief description of data sources relevant to physician economics. Physician economics is broadly defined as issues relating to productivity, fees, practice revenue, practice expenses, net income, payor mix, billing practices, and demographics. The inventory includes abstracts for a total of 30 data sources, representing 21 different sponsors. Three major "collectors" of physician data are represented:

- Federal government (e.g., HCFA, Bureau of the Census, Internal Revenue Service);
- Medical societies (e.g., AMA, specialty societies, state medical societies); and
- Other sources (e.g., physician recruitment firms and practice management consultants).

Federal government physician data sources include both periodic surveys aimed specifically at physicians and regularly-collected population surveys that include physician information as part of national surveys of many different professions and establishments.

Medical societies, which include the American Medical Association (AMA) as well as specialty and state societies, frequently collect data for policy formulation, research, and membership services. Many of these societies have been collecting data for several years, enabling both cross-sectional and time-series analysis.

The third group of sponsors, placement specialists/management consultants, collect primarily gross income and fringe benefit data as a baseline for their clients. Some may also gather data on hours worked, revenues, and expenses, also to be used by clients as baseline figures.

Methodology. Discussions with HCFA staff and other CHER staff identified known physician data sources as well as organizations that were likely to collect physician data. Methodology reports, survey questionnaires, sample tabulations, and other published materials were obtained from each of the data source sponsors. After reviewing published materials, telephone calls were placed to clarify and elaborate on specific survey characteristics.

Contents of Abstract. Each abstract contains seven basic types of information, each of which is defined below.

- **Description.** A brief description of basic survey characteristics, such as sample frame, geographic scope, eligibility, and sample (or universe) size.
- **Data Years.** The years that the data pertain to, and not necessarily the year the survey was conducted or the year appearing in the title of the survey. In some cases, practice pattern questions pertain to the current calendar year while financial questions pertain to respondents' most recent fiscal year.
- **Survey Elements.** A list of all of the information gathered in the survey, categorized by major type: physician/group characteristics, productivity, practice size, practice expenses, practice revenues, physician income, and "other."

- **Response Rate.** Generally, the number of respondents as a percent of all who were initially surveyed. Response rates are not always directly comparable because there are variations in how they are calculated.
- **Accessibility.** A brief description of how to begin to obtain the data. The relative ease of obtaining data varies substantially; the first step should be to communicate with the contact person.
- **Contact Person.** A name, address, and telephone number of someone that can be reached for additional information about the data source or inquiries into obtaining the data. In some cases this will serve only as an initial contact, depending on the researcher's needs.
- **References.** A list of publications based on the data and/or descriptions of survey methodology. In some cases, this does not serve as an exhaustive list.

Caveats. Two limitations of this inventory should be mentioned. This inventory may not include all databases related to physician economics. In narrowing the scope of included data, it is possible that some studies with pertinent physician economic data were excluded unintentionally. Moreover, it is possible that some data sources were not identified either because they were considered proprietary to the sponsor, because of inadequate probes for relevant data sources, or because we failed to identify the most knowledgeable respondent. Second, abstracts were not systematically verified with the contact person, although telephone calls were placed to clarify or expand on published material. Any errors of omission or commission are the responsibility of the authors.

INDEX OF DATA SOURCES**(in alphabetical order by sponsor)****ABSTRACT
NUMBER**

American Academy of Family Physicians (AAFP)	
• AAFP Membership Survey	1
American Academy of Orthopaedic Surgeons (AAOS)	
• Orthopaedic Physician Census	2
American College of Cardiology (ACC)	
• ACC Membership Directory Survey	3
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ABSTRACT
NUMBER

J.R. Zabka Associates

- Compensation Report on Hospital-Based and Group Practice Physicians 20

Massachusetts Medical Society (MMS)

- MMS Census of Physicians 21

Medical Economics

- Continuing Survey of Physicians 22

Medical Group Management Association (MGMA)

- Physician Compensation Survey 23
- Cost and Production Survey 24
- Academic Practice Faculty Compensation and Production Survey 25

National Center for Health Services Research (now AHCPR)

- Survey of Group Practices 26

Physician Payment Review Commission (PPRC)

- Survey of Physicians 27

Roth Young

- Health Care Wage and Salary Review 28

Texas Medical Association (TMA)

- Texas Physician Study 29

William M. Mercer, Inc.

- Survey of Total Compensation of U.S. Physician Employees 30

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DATA SOURCES	DATA ELEMENTS							
	Abstract Number	Physician/Group Characteristics	Productivity	Practice Size	Practice Expenses	Practice Revenues	Physician Income	Other
AAFP Membership Survey	1	•	•		•		•	•
Orthopaedic Physician Census (AAOS)	2	•	•		•			•
ACC Membership Directory Survey	3	•			•	•	•	•
Survey of Fellows (ACOG)	4	•	•		•	•	•	•
OB/GYN Services for Indigent Women (ACOG)	5	•						•
Professional Liability and Its Effects (ACOG)	6	•	•	•	•			•
ACR Manpower Survey	7	•	•	•				•
Socioeconomic Monitoring System (SMS) (AMA)	8	•	•	•	•		•	•
Group Practice Survey (AMA)	9	•		•	•	•		•
Physician's Professional Activities Survey (PPA) (AMA)	10	•	•					
APA Professional Activities Survey (PAS)	11	•	•		•	•	•	•
Assets and Expenditures Survey (AES) (Bureau of the Census)	12	•			•	•		•
Current Population Survey (CPS) (Bureau of the Census)	13	•	•				•	•
Decennial Census (Bureau of the Census)	14	•					•	
Service Annual Survey (SAS) (Bureau of the Census)	15	•				•		

INDEX OF DATA ELEMENTS
(continued)

DATA SOURCES	DATA ELEMENTS							
	Abstract Number	Physician/Group Characteristics	Productivity	Practice Size	Practice Expenses	Practice Revenues	Physician Income	Other
Employment and Earnings (BLS)	16		•				•	
Physician Revenue Survey (Ernst and Young/Jackson and Coker)	17					•		•
Physicians' Practice Costs and Income Survey (PPCIS) (HCFA)	18	•	•	•	•	•	•	•
Statistics of Income (SOI) (IRS)	19	•	•	•				•
Compensation Report on Hospital-Based and Group Practices (J.R. Ziska)	20	•	•	•			•	•
MMS Census of Physicians	21	•	•	•				•
Continuing Survey of Physicians (<u>Medical Economics</u>)	22	•	•	•	•		•	•
Physician Compensation Survey (MGMA)	23	•	•	•		•	•	•
Cost and Production Survey (MGMA)	24	•	•	•	•	•		
Academic Practice Faculty Compensation and Production Survey (MGMA)	25	•		•		•	•	
Survey of Group Practices (NCHSR)	26	•	•	•	•	•	•	•
Survey of Physicians (PPRC)	27	•	•	•	•	•	•	•
Health Care Wage and Salary Review (Roth Young)	28	•	•				•	
Texas Physician Study (TMA)	29	•	•		•	•	•	•
Survey of Total Compensation of U.S. Physician Employees (William M. Mercer, Inc.)	30	•	•		•	•	•	

ABSTRACTS

ABSTRACT # 1: *American Academy of Family Physicians Survey*

SPONSOR: American Academy of Family Physicians (AAFP)

DESCRIPTION: An annual survey of a stratified random sample of AAFP membership. Three separate surveys, each mailed to 4,400 physicians, cover hospital, socioeconomic, and office practice characteristics. The completed dataset for each of the three surveys was roughly 2,860 physicians in 1990.

DATA YEARS: 1987, 1988, 1989, 1990

SURVEY ELEMENTS: Physician/Practice Characteristics - gender, hospital affiliation, range of procedures performed, practice setting, Medicare caseload
Productivity - total hours, allocation of hours, total visits, allocation of visits
Practice Size - none
Practice Expenses - total tax-deductible professional expenses
Practice Revenues - none
Physician Income - personal net income
Other - malpractice premiums/coverage levels, billing practices, HMO/PPO participation, patient demographics, types of laboratory tests performed in office, types of diagnostic procedures performed in the office, average fees

RESPONSE RATE: 60-70% (1990 Survey)

ACCESSIBILITY: Data are not available to the public except in published, aggregate form.

CONTACT: Gordon Schmittling
American Academy of Family Physicians
8880 Ward Parkway
Kansas City, Missouri 64114
(816) 333-9700

REFERENCES: Facts About Family Practice, American Academy of Family Physicians, 1991.

ABSTRACT # 2: *Orthopaedic Physician Census*

SPONSOR: American Academy of Orthopaedic Surgeons (AAOS)

DESCRIPTION: A periodic survey of the universe (15,710) of AAOS membership nationwide. A total of 14,185 questionnaires were returned. Data was tabulated only for active, board-certified orthopaedic surgeons known to be engaged in the full- or part-time practice of orthopaedic surgery. The completed dataset consisted of 11,829 physicians in 1990. Basic socioeconomic data are collected in the first part of the questionnaire. In the second part, physicians are randomly allocated into three subsets, each of which received one supplemental form focusing on professional liability, arthroscopy, or electronic media.

DATA YEARS: 1986, 1988, 1990 (1986 is not comparable to later years)

SURVEY ELEMENTS: Physician/Practice Characteristics - active/inactive, specialty, faculty, age, gender, board certification, location, university affiliation, practice setting, areas of expertise, post-graduate fellowships

Productivity - # of surgical procedures, # of office visits

Practice Size - none

Practice Expenses - malpractice

Practice Revenues - none

Physician income - none

Other - malpractice premiums/coverage levels, HMO/PPO participation, patient demographics

RESPONSE RATE: 90.3% (1990 Survey)

ACCESSIBILITY: Data are generally not available to the public except in published, aggregate form. Requests for additional tabulations may be made by writing to the AAOS Department of Health Policy and Research.

CONTACT: Allen Praemer
 Research Manager
 Department of Health Policy and Research
 American Academy of Orthopaedic Surgeons
 222 South Prospect Avenue
 Park Ridge, Illinois 60068
 (708) 823-7186

REFERENCES: 1990-91 Orthopaedic Practice in the U.S., American Academy of Orthopaedic Surgeons, 1991.

ABSTRACT # 3: *Statistics of Income (SOI)*

SPONSOR: Department of the Treasury, Internal Revenue Service (IRS)

DESCRIPTION: The SOI division of the IRS produces several studies, each based on a stratified probability sample of income tax returns or other forms filed with the IRS. Response rates are not applicable because the sample consists of forms that have already been filed. The SOI division produces reports on individuals, corporations, partnerships, sole proprietorships, estates, and tax-exempt organizations. Statistics of physicians' returns can be found in the individual (i.e., physician employees), corporation, partnership, and sole proprietorship reports. Data are typically aggregated by industry ("offices of physicians") and includes detail on total income and total deductions.

DATA YEARS: SOI Bulletins have been published annually since 1916. Other reports are periodic.

SURVEY ELEMENTS: Physician/Practice Characteristics - legal structure (e.g., corporation, partnership, sole proprietorship), employment status

Productivity - none

Practice Size - none

Practice Expenses - wages, deferred compensation, fringe benefits, total rent/lease, depreciation, bad debt, maintenance, interest, legal fees, taxes, other

Practice Revenues - business receipts, capital gains, dividends

Physician Income - net income, interest income, dividend income, rental income

Other - total assets, total liabilities

RESPONSE RATE: Not applicable

ACCESSIBILITY: Reports and tapes can be purchased from the Director of the Statistics of Income Division (R:S), Internal Revenue Service, P.O. Box 2608, Washington, D.C. 20013; (202) 874-0410.

CONTACT: Tom Petska
Chief
Coordination and Publication
Statistics of Income Division
Internal Revenue Service
Washington, D.C. 20013
(202) 874-0360

REFERENCES: SOI Bulletin (quarterly); Corporation Source Book, 1988; Partnership Source Book, 1957-1983; Sole Proprietorship Source Book, 1957-1984; Studies of Tax Exempt Organizations, 1974-1987; Partnership Returns, 1978-1982.

ABSTRACT # 4: *Survey of Fellows***SPONSOR:** American College of Obstetricians and Gynecologists (ACOG)**DESCRIPTION:** A periodic survey of a national random sample of 2,000 ACOG members. Eligibility was limited to board-certified, board-eligible patient care obstetricians and/or gynecologists practicing in the U.S. Characteristic and productivity data pertain to the last week practiced, expense data pertain to 1989.**DATA YEARS:** 1990

SURVEY ELEMENTS: Physician/Practice Characteristics - active/inactive, subspecialty, race, age, gender, urban/rural, region, Medicare participation, years in medical practice, type of practice (salaried, fee-for-service, salaried employee of HMO)

Productivity - total weeks, total hours, allocation of hours, total visits, allocation of visits

Practice Size - none

Practice Expenses - wages, depreciation, medical equipment, materials and supplies, malpractice, total expenses, office expenses, other tax deductible expenses

Practice Revenues - practice revenue, distribution of revenue among group members

Physician Income - personal net income

Other - malpractice premiums, ownership of equipment, assignment rates

RESPONSE RATE: 64%**ACCESSIBILITY:** Data are generally not available to the public except in published, aggregate form. Additional requests must be made in writing.

CONTACT: Shelah Leader, Ph.D.
 American College of Obstetricians and Gynecologists
 409 12th Street, S.W.
 Washington, DC 20024-2188
 (202) 863-2570

REFERENCES: Forthcoming.

ABSTRACT # 5: *Survey of Fellows: OB/GYN Services for Indigent Women*

SPONSOR: The American College of Obstetricians and Gynecologists (ACOG)

DESCRIPTION: A survey of a random sample of ACOG Fellows, stratified to ensure a national representation. Excluded from the sample were Junior Fellows in their first four years of residency, military personnel, Fellows not in active practice, and those residing outside of the 50 states and the District of Columbia. A total of 5,377 questionnaires were distributed. The completed dataset consisted of 2,443 physicians. Data were weighted to adjust for population differences.

DATA YEARS: 1987, 1991

SURVEY ELEMENTS: Physician/Practice Characteristics - active/inactive, subspecialty, age, gender, multispecialty group, community size, salaried/non-salaried

Productivity - none

Practice Size - none

Practice Expenses - none

Practice Revenues - none

Physician Income - none

Other - patient demographics, Medicaid caseload, site of provision of obstetrics services, Medicaid participation issues

RESPONSE RATE: 45.4% (1991 Survey)

ACCESSIBILITY: Data are generally not available to the public except in published, aggregate form. Requests for additional tabulations may be made by writing to the Committee on Health Care for Underserved Women.

CONTACT: Jan Chapin
Committee on Health Care for Underserved Women
The American College of Obstetricians and Gynecologists
409 12th Street, S.W.
Washington, DC 20024-2188
(202) 863-2579

REFERENCES: OB/GYN Services for Indigent Women: Issues Raised by an ACOG Survey. The American College of Obstetricians and Gynecologists, 1989.

ABSTRACT # 6: *Survey of Fellows: Professional Liability and Its Effects***SPONSOR:** American College of Obstetricians and Gynecologists (ACOG)**DESCRIPTION:** A periodic survey of ACOG Fellows concerning professional liability issues. Questionnaires were mailed to a stratified random sample of 4,100 ACOG Fellows. The sample excluded Junior Fellows still in residency, military personnel, members outside the 50 states, and inactive practitioners. The completed 1989 dataset consisted of 2,213 physicians. Data were weighted to adjust for population differences.**DATA YEARS:** 1982, 1984, 1986, 1989**SURVEY ELEMENTS:** Physician/Practice Characteristics - active/inactive, subspecialty, age, gender, region, multi-specialty group, # of years in practice, practice settingProductivity - # of deliveries per monthPractice Size - # of full-time MDsPractice Expenses - malpractice premiumsPractice Revenues - nonePhysician Income - noneOther - malpractice coverage levels, # of claims filed against OB/GYN, total # of liability claims, types of liability claims, amount paid for liability claims, changes in practice as a result of liability risk**RESPONSE RATE:** 54% (1989 Survey)**ACCESSIBILITY:** Data are generally not available to the public except in published, aggregate form. Additional requests must be made in writing.**CONTACT:** Kenneth V. Heland, Associate Director
Professional Liability
American College of Obstetricians and Gynecologists
409 12th Street, S.W.
Washington, DC 20024-2188
(202) 638-5577**REFERENCES:** Professional Liability and Its Effects: Report of a 1990 Survey of ACOG's Membership, American College of Obstetricians and Gynecologists, September 1990.

ABSTRACT # 7: *American College of Radiology Manpower Survey*

SPONSOR: American College of Radiology (ACR)

DESCRIPTION: A periodic survey of a stratified random sample of radiologists nationwide. The AMA Physician Masterfile serves as the sampling frame. The completed dataset (1990 survey) consisted of 1,850 radiologists (including diagnostic, therapeutic, and nuclear subspecialties). The primary focus is to collect data on physician characteristics and information on areas of expertise (e.g., CT scan, MRI, pediatric, vascular).

DATA YEARS: 1978, 1981, 1984, 1987, 1990

SURVEY ELEMENTS: Physician/Practice Characteristics - active/inactive, subspecialty, age, gender, board certification, urban/rural, region, multispecialty group, ownership, experience, major patient-care activity, areas of expertise, practice setting, types of procedures performed

Productivity - total weeks, total hours, allocation of hours

Practice Size - # of full-time MDs, # of part-time MDs

Practice Expenses - none

Practice Revenues - none

Physician Income - none

Other - HMO/FFO participation, assignment rates

RESPONSE RATE: 68% (1990 Survey)

ACCESSIBILITY: Data are generally available to the public after the ACR has generated its internal documents. Requests must be made in writing.

CONTACT: William C. Chan
Research Analyst
American College of Radiology
1891 Preston White Drive
Reston, Virginia 22091
(703) 648-8983

REFERENCES: None.

ABSTRACT # 8: *Socioeconomic Monitoring System***SPONSOR:** American Medical Association

DESCRIPTION: An annual survey of a nationally representative, stratified sample of physicians drawn from the AMA Masterfile. Questionnaires were administered by phone to physicians nationally, mail surveys were also used to maximize response. Eligibility was limited to nonfederal, fully licensed MDs that worked more than 20 hours per week. The completed dataset consisted of 4,022 physicians (1990 survey). Weights are calculated to adjust for differential nonresponse, item-nonresponse, and sample allocation. Income and expense data are collected for the year prior to the survey, while all other data correspond to the year of the survey.

DATA YEARS: 1982 - 1989. Data was collected prior to 1982 but it is not strictly comparable to later years.

SURVEY ELEMENTS: Physician/Practice Characteristics - active/inactive, specialty, faculty, age, gender, FMG status, board certification, urban/rural, region, Medicare participation, multispecialty group, ownership, hospital affiliation

Productivity - surgical assists, total weeks, total hours, allocation of hours, total visits, allocation of visits

Practice Size - number of patients, # of full-time MDs, # of part-time MDs, # of full-time non-MD employees, # of part-time non-MD employees

Practice Expenses - wages, fringe benefits, total rent/lease, depreciation, medical equipment, materials and supplies, malpractice, utilities, administrative, physicians' share of expenses

Practice Revenues - none

Physician Income - personal net income, bonuses, profit-sharing

Other - fees by payor type/procedure, ownership of equipment, patients' waiting time, HMO/PPO participation, assignment rates, patient demographics

RESPONSE RATE: 69.1% (1990 Survey)

ACCESSIBILITY: Data are generally available one year after completion (e.g., the 1990 survey, with 1989 income and expense data, was available in mid-1991). Tapes cost \$5,000 for nonprofit organizations and \$10,000 for others. Requests must be in writing.

CONTACT: Sara L. Thran
Director, Special Products
Center for Health Policy Research
American Medical Association
515 North State Street
Chicago, IL 60610
(312) 464-4338

REFERENCES: Socioeconomic Characteristics of Medical Practice, 1982-1990, American Medical Association.

ABSTRACT # 9: *Group Practice Survey*

SPONSOR: American Medical Association

DESCRIPTION: A national survey of the universe of medical groups drawn from the AMA Physician Masterfile and the Medical Group Management Association's listings. A medical group practice was defined as "the application of medical service by three or more physicians formally organized to provide medical care, consultation, diagnosis, and/or treatment, through the joint use of equipment, records, and personnel, and with income from practice distributed according to some prearranged plan." The study population totalled 16,579 group practices representing 155,628 physicians (1988 Survey).

DATA YEARS: 1965, 1969, 1975, 1980, 1984, 1988 (next in 1992).

SURVEY ELEMENTS: Physician/Practice Characteristics - *specialty, faculty, urban/rural, region, Medicare participation, multispecialty group, ownership, group's organizational structure, management responsibilities*

Productivity - *none*

Practice Size - *# of full-time MDs, # of full-time non-MD employees, # of full-time MDs by specialty*

Practice Expenses - *overhead expenses as a percent of annual revenue*

Practice Revenues - *distribution of revenue among group members, sources of revenue*

Physician Income - *none*

Other - *HMO/PPO participation, use of practice parameters, peer review, ownership of facilities (e.g., lab)*

RESPONSE RATE: 87.9% (1988 Survey)

ACCESSIBILITY: Information gathered through the Group Practice Survey is available for sample selection, survey consultation, credentialing activities, and list house activities. Special tabulations may be requested by writing Gene Roback, Physician Data Services, American Medical Association, same address as below.

CONTACT: Penny L. Havlicek
Division of Survey and Data Resources
American Medical Association
515 North State Street
Chicago, IL 60610
(312) 464-5318

REFERENCES: Medical Groups in the U.S.: A Survey of Practice Characteristics,
American Medical Association, 1990.

ABSTRACT # 10: *Physicians' Professional Activities Survey (PPA)***SPONSOR:** American Medical Association**DESCRIPTION:** This national survey serves as the primary means of tracking physicians and enables the AMA to update the Physician Masterfile. The PPA is a census of all physicians, continuously updated. Medical schools provide the initial information and subsequent updates are done using a mix of mailings and telephoning. The primary goal is to collect basic physician data, such as addresses, telephone numbers, and specialty, as well as other practice characteristics such as hospital affiliation and hours worked. The PPA gathers information on all 600,000+ M.D.s and D.O.s nationwide.**DATA YEARS:** Continuously updated since 1968.**SURVEY ELEMENTS:** Physician/Practice Characteristics - active/inactive, specialty, faculty, race, age, gender, FMG status, board certification, urban/rural, region, ownership, hospital affiliation, name of medical school, licensure status, information on disciplinary actionsProductivity - total hoursPractice Size - nonePractice Expenses - nonePractice Revenues - nonePhysician Income - noneOther - none**RESPONSE RATE:** 100%**ACCESSIBILITY:** Information gathered through the PPA and listed in the Physician Masterfile is available for sample selection, survey consultation, credentialing activities, and list house activities. Special tabulations may be requested or parts of the Masterfile may be licensed to outside users. Requests must be made in writing.**CONTACT:** Gene Roback
Physician Data Services
American Medical Association
515 North State Street
Chicago, IL 60610
(312) 464-5180**REFERENCES:** The AMA has several periodic publications pertaining to the Physician Masterfile: American Medical Directory; Physician Characteristics and Distribution in the United States; U.S. Medical Licensure Statistics and License Requirements; Specialty Profiles; Foreign Medical Graduates; National Physician Trends.

ABSTRACT # 11: *American Psychiatric Association Professional Activities Survey (PAS)*

SPONSOR: American Psychiatric Association (APA)

DESCRIPTION: A survey of all APA members and non-member psychiatrists nationwide. Non-members were identified using AMA Physician Masterfile data. Two data sets were constructed: one containing information for 23,126 APA members and the other containing information for 2,922 non-members. The goal of the survey was to collect core information, such as practice setting, age, and gender, in addition to special topics such as patient characteristics and referral patterns.

DATA YEARS: 1982, 1988/89

SURVEY ELEMENTS: Physician/Practice Characteristics - active/inactive, subspecialty, race, age, gender, FMG status, board certification, urban/rural, zip code, Medicare participation, hospital affiliation, area of expertise, publications, practice setting

Productivity - total weeks, total hours, allocation of hours, total visits, allocation of visits

Practice Size - none

Practice Expenses - total business operating expenses

Practice Revenues - sources of revenue

Physician income - personal net income, percent of net income from pre-paid medical plans, gross income

Other - billing practices, HMO/PPO participation, patient demographics, referral patterns

RESPONSE RATE: 67.7% (APA member component), 28.9% (non-member component)

ACCESSIBILITY: Data are generally not available to the public except in published, aggregate form. Requests for additional tabulations may be made by writing to the APA Office of Research.

CONTACT: Thomas Dial, Ph.D.
Survey Design and Analysis Department
American Psychiatric Association
1400 "K" Street, N.W.
Washington, DC 20005
(202) 682-6218

REFERENCES: None

ABSTRACT # 12: *Assets and Expenditures Survey (AES)***SPONSOR:** U.S. Department of Commerce, Bureau of the Census

DESCRIPTION: The AES provides data on selected characteristics of service industry firms, including capital expenditures, depreciable assets, and operating expenses. The AES is a nationally representative sample of service industry firms drawn from the Census of Service Industries, stratified by geographic location and firm size. Eligible establishments are those with Standard Industrial Classification (SIC) codes beginning with 7 or 8. SIC code 801 pertains to "offices of physicians" and code 803 pertains to "offices of osteopathic physicians." SIC 801 (and 803) are defined as "establishments of licensed practitioners having the degree of MD (D.O.) and engaged in the practice of generalized or specialized medicare and surgery (osteopathy)." The sample for SIC=801 was 921 in 1987. The same sample frame is used for the Service Annual Survey (see Abstract #9).

DATA YEARS: 1954, 1958, 1963, and at 5-year intervals beginning in 1967. The most recent is 1987.

SURVEY ELEMENTS: Physician/Practice Characteristics - corporations/all others

Productivity - none

Practice Size - none

Practice Expenses - wages, fringe benefits, total rent/lease, depreciation, materials and supplies, automobile, maintenance, utilities, advertising, taxes and license fees, total operating expenses, capital expenditures (buildings, auto, computers), asset depreciation (buildings, machinery), legally required expenditures

Practice Revenues - receipts/revenue

Physician Income - none

Other - acquisition value of depreciable assets

RESPONSE RATE: 85% (participation is required by law)

ACCESSIBILITY: Printed reports are available from the Government Printing Office and data tapes with aggregate data are available from the Bureau of the Census. Order forms are available from Customer Services, Census Bureau, Washington, D.C. 20233 (301) 763-4100. Special tabulations are available upon written request.

CONTACT: Sheldon Ziman
Assets and Expenditures Survey
Bureau of the Census
Washington D.C. 20233
(301) 763-5862

REFERENCES: 1987 Census of Service Industries, "Capital Expenditures, Depreciable Assets and Operating Expenses," Bureau of the Census, June 1991.

ABSTRACT # 13: *Current Population Survey (CPS)*

SPONSOR: U.S. Department of Commerce, Bureau of the Census

DESCRIPTION: A nationally representative survey of a probability sample of 60,000 occupied households. The covered group includes noninstitutionalized persons 16 years of age or more. Respondents are asked to report their occupational title, employment status, hours worked, hourly wage, and average weekly earnings. The January 1991 survey included data for 266 employed physicians. Data for self-employed persons are collected but not tabulated. Income statistics are gathered once a year in the March Supplement.

DATA YEARS: Monthly since 1940

SURVEY ELEMENTS: Physician/Practice Characteristics - active/inactive, race, age, gender, urban/rural, region, education level

Productivity - hours, overtime hours

Practice Size - none

Practice Expenses - none

Practice Revenue - none

Physician Income - hourly wage, average weekly earnings

Order - reasons for unemployment

RESPONSE RATE: Average 97% each month

ACCESSIBILITY: Printed reports are available from the Government Printing Office. Other requests must be made in writing to the Bureau of the Census, Washington, D.C. 20233. Printed materials are also available from Customer Services, Census Bureau, Washington, D.C. 20233 (301) 763-4100.

CONTACT: Jim Warden
Economics and Statistics Administration
Bureau of the Census
Washington, DC 20233
(301) 763-2773

REFERENCES: Money Income of Households, Families, and Persons in the United States: 1990, U.S. Department of Commerce, Bureau of the Census, 1991.

ABSTRACT # 14: *Decennial Census***SPONSOR:** United States Department of Commerce, Bureau of the Census**DESCRIPTION:** The Decennial Census collects all information on all U.S. residents. Physicians are identified by their self-reported occupational title. Data is aggregated by education level, gender, and location, but not by specialty or any other variables relating to medical practice. The Census collects "money income" statistics. Money income is defined as any compensation received regularly. It excludes capital gains, noncash compensations, and any in-kind compensation.**DATA YEARS:** Every tenth year ending in zero. 1990 is available in Spring of 1992.**SURVEY ELEMENTS:** Physician/Practice Characteristics - education, gender, location
Productivity - none
Practice Size - none
Practice Expenses - none
Practice Revenues - none
Physician Income - money income (any compensation received regularly)
Other - none**RESPONSE RATE:** Participation is required by law**ACCESSIBILITY:** Printed reports are available from the Government Printing Office and data tapes with aggregate data are available from the Bureau of the Census. Order forms are available from Customer Services, Census Bureau, Washington D.C. 20233 (301) 763-4100.**CONTACT:** Gordon Lester
Decennial Income Statistics
U.S. Bureau of the Census
Washington, D.C. 20233
(301) 763-8576**REFERENCES:** Socioeconomic Characteristics: CP-2 1980, U.S. Department of Commerce, Bureau of the Census, 1982.
Note: A 1990 Edition based on the 1990 Decennial Census will be available in the spring of 1992.

ABSTRACT # 15: *Service Annual Survey (SAS)*

SPONSOR: U.S. Department of Commerce, Bureau of the Census

DESCRIPTION: An annual survey of selected characteristics of service industry firms, including operating expenses, receipts, and revenue. The SAS is a nationally representative sample of establishments with Standard Industrial Classification (SIC) codes beginning with 7 or 8. SIC code 801 pertains to "offices of physicians" and code 803 pertains to "offices of osteopathic physicians." SIC 801 (and 803) are defined as "establishments of licensed practitioners having the degree of MD (D.O.) and engaged in the practice of generalized or specialized medicare and surgery (osteopathy)." Approximately 1,000 SIC=801 establishments were sampled in 1990. The same sample frame is used for the Assets and Expenditure Survey (see Abstract #12).

DATA YEARS: Annually since 1982. Monthly prior to 1982.

SURVEY ELEMENTS: Physician/Practice Characteristics - *federal income tax status*
Productivity - *none*
Practice Size - *none*
Practice Expenses - *none*
Practice Revenues - *receipts (of taxable firms), revenues (of tax-exempt firms), per capita receipts*
Physician Income - *none*
Other - *none*

RESPONSE RATE: 86% (Participation is required by law)

ACCESSIBILITY: Printed reports are available from the Government Printing Office and data tapes with aggregate data are available from the Bureau of the Census. Order forms are available from Customer Services, Census Bureau, Washington D.C. 20233. (301) 763-4100.

CONTACT: Thomas Zabelsky
Chief
Current Services Branch
Bureau of the Census
Washington D.C. 20233
(301) 763-5528

REFERENCES: 1989 Service Annual Survey, U.S. Department of Commerce, Bureau of the Census, September 1990.

ABSTRACT # 16: *Employment and Earnings***SPONSOR:** U.S. Department of Labor, Bureau of Labor Statistics (BLS)

DESCRIPTION: A compilation of statistics from household interviews and reports from employers. The household interview component is based on the Bureau of the Census's Current Population Survey (CPS) (see Abstract #13) and reports information on employment, hours worked and median earnings of wage and salary workers. Establishment-level data are gathered through the BLS's monthly probability sampling of establishments. The completed household dataset totalled 57,400 observations in March of 1989. The completed establishment dataset totalled 282,003 observations in March of 1989, 63,877 of which were service-related. Establishment data is aggregated by Standard Industrial Classification (SIC) code.

DATA YEARS: Monthly since 1940 for the household survey and monthly since 1915 for the establishment survey.

SURVEY ELEMENTS: Physician/Practice Characteristics - none
Productivity - total weeks, total hours
Practice Size - none
Practice Expenses - none
Practice Revenues - none
Physician Income - average weekly earnings
Other - none

RESPONSE RATE: Average 97% each month for the CPS component, 35% for the establishment component

ACCESSIBILITY: Printed reports are available from the Government Printing Office. Other requests for data must be made in writing to the Bureau of Labor Statistics, Washington D.C. 20212.

CONTACT: Diane E. Herz
Economist
Bureau of Labor Statistics
U.S. Department of Labor
Washington, D.C. 20212
(202) 523-1944

REFERENCES: Employment and Earnings, U.S. Department of Commerce, Bureau of Labor Statistics, January 1991.

ABSTRACT # 17: *Physician Revenue Survey*

SPONSOR: Ernst and Young/Jackson and Coker

DESCRIPTION: A survey of the universe of all U.S. hospitals. Questionnaires were mailed to over 6,000 hospitals nationally. The completed dataset consisted of 800 hospitals representing a mix of public/private, federal/nonfederal, and acute-care/specialty-care hospitals. The goal of the survey was to gather data pertaining to inpatient revenue per physician. Nonresponse bias was not assessed.

DATA YEARS: 1985, 1986, 1987, 1988, 1989

SURVEY ELEMENTS: Physician/Practice Characteristics - none
Productivity - none
Practice Size - none
Practice Expenses - none
Practice Revenues - inpatient revenue per physician
Physician Income - none
Other - hospital bed size, type of hospital, ownership of hospital

RESPONSE RATE: 13% (1990 Survey)

ACCESSIBILITY: Data are only available in aggregate form and by written request.

CONTACT: Beth Spoto
Ernst and Young
235 Peachtree Street, N.E.
Suite 2100
Atlanta, Georgia, 30303
(404) 588-4427

REFERENCES: Annual report to participants.

ABSTRACT # 18: Physicians' Practice Costs and Income Survey (PPCIS)**SPONSOR:** Health Care Financing Administration (HCFA)

DESCRIPTION: A nationally representative stratified random sample of physicians drawn from the AMA Physician Masterfile. Questionnaires were administered by telephone. For the 1988 PPCIS, eligibility was limited to physicians working at least 20 hours per week throughout 1988, were full or part owners of their practice in 1988 (or employed by another physician in 1988), received at least 80 percent of their income from their fully or part-owned practice, and was in the same medical practice for all of 1988. Residents, clinical fellows, and research fellows were excluded. The completed dataset consisted of 3,505 physicians. Missing values were imputed and weights were assigned to account for disproportionate sampling and differential nonresponse. Earlier surveys have different eligibility criteria and sampling techniques, but adjustments can be made to achieve comparable samples.

DATA YEARS: 1976-1979, 1983, 1986 (follow-up to 1983 survey), 1988.

SURVEY ELEMENTS: Physician/Practice Characteristics - active/inactive, specialty, race, age, gender, FMG status, board certification, urban/rural, region, Medicare participation, multispecialty group, ownership

Productivity - total weeks, total hours, allocation of hours, total visits, allocation of visits

Practice Size - # of full-time MDs, # of part-time MDs, # of full-time non-MD employees, # of part-time non-MD employees, # of same-specialty MDs, # of full-time MD employees, # of part-time MD employees

Practice Expenses - wages, deferred compensation, fringe benefits for all physicians, other physician employees, and non-physician employees, total rent/lease/depreciation, utilities, cost per square foot, medical equipment, materials and supplies, malpractice, automobile, continuing education, other

Practice Revenues - practice revenue, distribution of revenue among group members, sources of revenue

Physician Income - personal net income, percent of net income from main practice

Other - malpractice premiums/coverage levels, ownership of equipment, Medicare billing practices, HMO/PPO participation (1983 survey), assignment rates

RESPONSE RATE: 61% (1988 Survey)**ACCESSIBILITY:** Public-use data tapes are available from NTIS, U.S. Department of Commerce, National Technical Information Service, Springfield, VA 22161; (703) 387-4650.

CONTACT: Nancy McCall
Health Care Financing Administration
Oak Meadows Building, Room 2-B-14
6325 Security Boulevard
Baltimore, MD 21207
(410) 966-6602

REFERENCES: Thalji, Lisa et al., 1988 Physicians' Practice Costs and Income Survey: Final Report and User's Manual, Volume 1: Methodology Report, January 1991.

ABSTRACT # 19: *American College of Cardiology Membership Directory Survey*

SPONSOR: American College of Cardiology (ACC)

DESCRIPTION: A periodic survey of all (19,200) ACC members nationwide. Half of the survey questionnaire collects basic address, specialization, and certification information. The remainder of the questionnaire collects information on practice arrangements, procedures performed, and hours worked. The completed dataset consisted of 11,700 physicians in 1990.

DATA YEARS: 1986, 1988, 1990

SURVEY ELEMENTS: Physician/Practice Characteristics - specialty, faculty, age, gender, board certification, urban/rural, region, Medicare participation, practice setting

Productivity - total hours, allocation of hours

Practice Size - # of full-time MDs

Practice Expenses - none

Practice Revenues - none

Physician Income - none

Other - HMO/PPO participation, patient demographics

RESPONSE RATE: 61% (1990 Survey)

ACCESSIBILITY: Data are available only by writing to the ACC. The ACC Executive Committee must approve any request.

CONTACT: Timothy L. Kennedy, Director
Surveys and Information Resources
American College of Cardiology
9111 Old Georgetown Road
Bethesda, Maryland 20814
(301) 897-5400

REFERENCES: None.

ABSTRACT # 20: *Compensation Report on Hospital-Based and Group Practice Physicians*

SPONSOR: John R. Zabka Associates

DESCRIPTION: An annual survey of hospital-based and group practice physicians, drawn from Zabka Associates' listings. The most recent complete dataset consisted of 370 hospitals and medical groups. Data are reported in aggregate form by physician specialty.

DATA YEARS: 1971 - 1990 annually

SURVEY ELEMENTS: Physician/Practice Characteristics - specialty, region, federal/non-federal
Productivity - total hours
Practice Size - # of full-time MDs, bed size
Practice Expenses - none
Practice Revenues - none
Physician Income - incentive bonus payments, base salary, percent of salary allocated to fringe, planned percentage increase in income
Other - hospital bed-size, government/nongovernment status

RESPONSE RATE: 100%

ACCESSIBILITY: Aggregate reports can be ordered for \$250 per copy. The annual reports contain information on employed physicians' bonuses and base salaries by hospital size and federal/non-federal status.

CONTACT: John R. Zabka
John R. Zabka Associates
69 Minnehan Boulevard
P.O. Box 376
Oakland, NJ 07436
(201) 427-2221

REFERENCES: Compensation Report on Hospital-Based and Group Practice Physicians, 1990-1991, John R. Zabka Associates, 1991.

ABSTRACT # 21: *Official Physician Census*

SPONSOR: Massachusetts Medical Society (MMS)

DESCRIPTION: A survey of the universe of physicians in Massachusetts and bordering counties, drawn from MMS and AMA listings. Eligibility was limited to all MDs with a full license. The complete dataset consists of 13,659 physicians. Nonrespondents were not analyzed.

DATA YEARS: 1990

SURVEY ELEMENTS: Physician/Group Characteristics - active/inactive, specialty, faculty, race, age, gender, FMG status, board certification, urban/rural, zip code, year of licensure, federal/nonfederal, post-graduate training

Productivity - inpatient/outpatient hours, in-state/out-of-state hours

Practice Size - # full-time MDs

Practice Expenses - none

Practice Revenues - none

Physician Income - none

Other - HMO/PPO participation

RESPONSE RATE: 71.9%

ACCESSIBILITY: Data are not available to the public, although some results may be made available with a written request.

CONTACT: David Pomeranz
 Massachusetts Medical Society
 Waltham, MA 02154
 (617) 893-4610

REFERENCES: None.

ABSTRACT # 22: *Continuing Survey of Physicians*

SPONSOR: Medical Economics

DESCRIPTION: An annual, national survey of physicians drawn from Medical Economics' master list. Questionnaires were mailed to all those listed, totalling 27,009 MDs and 3,754 D.O.s (1991 survey). Eligibility was limited to office-based physicians who provided patient care throughout the preceding year. The complete data set consists of 5,733 M.D.s and 1,094 D.O.s (1991 survey).

DATA YEARS: Annually, though year of first survey is unknown.

SURVEY ELEMENTS: Physician/Practice Characteristics - active/inactive, specialty, age, years in practice, gender, urban/rural, location, ownership

Productivity - hours, visits

Practice Size - # of full-time MDs

Practice Expenses - wages, total rent/lease, depreciation, medical equipment, materials and supplies, malpractice, automobile, continuing education, professional dues, consultants fees

Practice Revenues - none

Physician Income - personal net income

Other - fees by payor type/procedure

RESPONSE RATE: 30-40% (1991 Survey)

ACCESSIBILITY: Unknown.

CONTACT: Medical Economics
Continuing Survey of Physicians
5 Paragon Drive
Montvale, NJ 07645-1742
(201) 358-7200

REFERENCES: Medical Economics, Fall issues.

ABSTRACT # 23: *Physician Compensation Survey*

SPONSOR: Medical Group Management Association (MGMA)

DESCRIPTION: An annual survey of all 4,750 MGMA medical groups. A medical group is defined as three or more full-time equivalent physicians formally organized to provide medical care. The completed dataset in 1990 consisted of 997 groups representing 15,979 physicians.

DATA YEARS: Annually: 1986, 1988, 1989, 1990

SURVEY ELEMENTS: Physician/Practice Characteristics - specialty distribution, age, gender, board certification, urban/rural, region, Medicare participation, multispecialty group, ownership, group's primary affiliation, legal organization, years in specialty

Productivity - total hours per week

Practice Size - # of full-time MDs

Practice Expenses - none (see Abstract #24)

Practice Revenues - professional service production

Physician Income - salary (gross dollar amount paid for medical services rendered, including all bonuses and deferred compensation), physician compensation method

Other - HMO/PPO participation

RESPONSE RATE: 22% (1990 Survey)

ACCESSIBILITY: Data are generally not available to the public except in published, aggregate form. Any additional requests must be made in writing.

CONTACT: Steven S. Lazarus, Ph.D.
Center for Research in Ambulatory Health Care Administration
Medical Group Management Association
104 Inverness Terrace East
Englewood, Colorado 80112
(303) 397-7879

REFERENCES: Physician Compensation Survey Report: 1991 Report Based on 1990 Data, Medical Group Management Association, 1991.

ABSTRACT # 24: *Cost and Production Survey***SPONSOR:** Medical Group Management Association (MGMA)**DESCRIPTION:** An annual survey of all 4,733 MGMA medical groups. A medical group is defined as three or more full-time equivalent physicians formally organized to provide medical care. The completed dataset consisted of 988 groups representing approximately 16,000 physicians (1990 survey).**DATA YEARS:** Annually: 1980-1990**SURVEY ELEMENTS:** Physician/Practice Characteristics - specialty distribution, multispecialty group, age, gender, board certification, urban/rural, region, Medicare participation, group's primary affiliation, ownership, legal organizationProductivity - total hours per weekPractice Size - # of full-time equivalent MDsPractice Expenses - wages, deferred compensation, fringe benefits. Prior to 1990 Survey: depreciation, medical equipment, materials and supplies, bad debt, charity care, maintenance, payments to lab facilities, utilities, marketing, total rent/lease, malpractice, contracted services, professional dues, interest, consultants fees, legal feesPractice Revenues - practice revenue, distribution of revenue among group members, sources of revenue, chargesPhysician Income - none (see Abstract #23)Other - none**RESPONSE RATE:** 21% (1990 Survey)**ACCESSIBILITY:** Data are generally not available to the public except in published, aggregate form. Any additional requests must be made in writing.**CONTACT:** Steven S. Lazarus, Ph.D.
Center for Research in Ambulatory Health Care Administration
Medical Group Management Association
104 Inverness Terrace East
Englewood, Colorado 80112
(303) 397-7879**REFERENCES:** Cost and Production Survey Report: 1991 Report Based on 1990 Data, Medical Group Management Association, 1991.

ABSTRACT # 25: *Academic Practice Physician Compensation and Production Survey*

SPONSOR: Medical Group Management Association (MGMA)

DESCRIPTION: An annual survey of all university-affiliated MGMA member medical groups. One questionnaire was completed for each medical school department. Individual faculty member data were deleted from the survey sample if physician compensation was less than \$20,000 per year, if allied healthcare professional compensation was less than \$10,000 per year, or if the faculty member was born before 1923. The completed 1990 dataset consisted of 387 departments, representing 77 medical schools and 10,157 faculty members. Faculty members were physicians as well as doctorates and limited-license practitioners.

DATA YEARS: 1988, 1990

SURVEY ELEMENTS: Physician/Practice Characteristics - faculty, age, gender, urban/rural, region, multispecialty group, university affiliation, hospital affiliation, specialty distribution, public/private, type of operating system

Productivity - none

Practice Size - # of full-time equivalent faculty members

Practice Expenses - none

Practice Revenues - distribution of revenue among group members, professional service production

Physician Income - total compensation for full-time faculty

Other - none

RESPONSE RATE: 53% (1990 Survey)
Note: This is a response rate based on the number of medical schools responding. Response rates for individual departments and faculty members are important but difficult to accurately compute.

ACCESSIBILITY: Data are generally not available to the public except in published, aggregate form. Any additional requests must be made in writing.

CONTACT: Steven S. Lazarus, Ph.D.
Center for Research in Ambulatory Health Care Administration
Medical Group Management Association
104 Inverness Terrace East
Englewood, Colorado 80222
(303) 397-7879

REFERENCES: Academic Practice Physician Compensation and Production Survey Report: 1991 Report Based on 1990 Data, Medical Group Management Association, 1991.

ABSTRACT # 26: Survey of Group Practices**SPONSOR:** National Center for Health Services Research (NCHSR)**DESCRIPTION:** A one-time national survey of a sample of medical group practices drawn from the AMA Physician Masterfile. Eligibility was limited to groups of 3 or more physicians provided those physicians were either general surgeons, general practitioners, pediatricians, internists, obstetricians, or gynecologists. The sample was stratified by size and type of group as well as by physician specialty. Two analytic files were generated: one containing group-level information for 957 groups and another containing physician-level information for 6,342 physicians practicing in those groups. Questionnaires were administered in-person by 160 interviewers nationwide.**DATA YEARS:** 1977 or 1978, depending on respondent's last complete fiscal year at time of study.

SURVEY ELEMENTS: Physician/Practice Characteristics - active/inactive, specialty, faculty, race, age, gender, FMG status, board certification, urban/rural, region, Medicare participation, multispecialty group, university affiliation, ownership, hospital affiliation, group sponsor (e.g., labor union, industry, hospital), medical school affiliation, enrollment in continuing education

Productivity - total weeks, total hours, allocation of hours, total visits, allocation of visits, number of patients seen, types of operations performed

Practice Size - # of full-time MDs, # of part-time MDs, # of full-time non-MD employees, # of part-time non-MD employees, number of examining rooms, # of dentists, # of oral surgeons

Practice Expenses - wages, total rent/lease/depreciation, materials and supplies, malpractice, bad debt, maintenance, payments to lab facilities, allocation of costs to group members

Practice Revenues - practice revenue, distribution of revenue among group members, sources of revenue

Physician Income - personal net income, percent of net income from main practice

Other - fees by payor type/procedure, ownership of equipment, billing practices, patient coverage by Medicare, Medicaid, uninsured

RESPONSE RATE: 63.7% (Groups), 54% (Physicians)**ACCESSIBILITY:** Available through National Technical Information Service (NTIS). Data tape order # PB80-191349/HBJ**CONTACT:** Mathematica Policy Research, Inc.
Princeton, N.J. 08540
(609) 275-2332**REFERENCES:** Analysis of Economic Performance in Medical Group Practices: Final Report and Executive Summary, Mathematica Policy Research, Inc., July 1979.

ABSTRACT # 27: *Survey of Physicians*

SPONSOR: Physician Payment Review Commission (PPRC)

DESCRIPTION: A nationally representative stratified sample of physicians drawn from the AMA Physician Masterfile. Questionnaires were mailed and followed with telephone calls. Eligibility was limited to physicians that were active in 1987 and not residents, clinical fellows, researchers, faculty, or administrators. Also, salaried employees, employees of other M.D.s, and physicians that work less than 20 hours per week were excluded. The completed dataset contained practice expense data for 2,828 physicians. Weights were assigned to account for disproportionate sampling among strata and differential nonresponse.

DATA YEARS: 1987

SURVEY ELEMENTS: Physician/Practice Characteristics - *active/inactive, specialty, board certification, urban/rural, region, Medicare participation, multi-specialty group*

Productivity - *total weeks, total hours, allocation of hours, # of patient contacts, allocation of patient contacts*

Practice Size - *# of full-time MDs, # of part-time MDs, # of full-time non-MD employees, # of part-time non-MD employees*

Practice Expenses - *wages, deferred compensation, fringe benefits, total rent/lease/depreciation, medical equipment, materials and supplies, malpractice, maintenance, payments to lab facilities, utilities, contracted services*

Practice Revenue - *sources of revenue*

Physician Income - *personal net income, percent of net income from main practice*

Other - *malpractice premiums/coverage levels, ownership of equipment, Medicare billing practices, assignment rates, percent total bills considered bad debt*

RESPONSE RATE: 62%

ACCESSIBILITY: Requests for data tapes may be made in writing directly to the PPRC.

CONTACT: Lauren LeRoy, Ph.D.
 Physician Payment Review Commission
 Suite 510
 2120 L Street, N.W.
 Washington, D.C. 20037
 (202) 653-7220

REFERENCES: Berk, M.L. et al., 1988 National Survey of Physicians. Final Report, 1989.

ABSTRACT # 28: *Health Care Wage and Salary Review*

SPONSOR: Roth & Young Personnel Specialists

DESCRIPTION: An annual study of Roth & Young private placement listings for employment opportunities for physicians and allied health workers nationally. Listings represent 2,000 employment openings for physicians of several different specialties.

DATA YEARS: 1990

SURVEY ELEMENTS: Physician/Practice Characteristics - specialty

Productivity - total weeks, total hours

Practice Size - none

Practice Expenses - none

Practice Revenues - none

Physician Income - median annual net income

Other - none

RESPONSE RATE: Not applicable

ACCESSIBILITY: Data are generally not available to the public except in published, aggregate form. Any additional requests must be made in writing.

CONTACT: William Beck
Roth and Young
New York, NY
(212) 557-4900

REFERENCES: "1990 Wage and Salary Review: Health Care Industry," Roth Young, 1991.

ABSTRACT # 29: *Texas Physician Study*

SPONSOR: Texas Medical Association (TMA)

DESCRIPTION: An annual survey of a sample of Texas physicians (both TMA members and non-members). Telephone interviews were conducted with 800 randomly selected physicians. The goal of the survey was to gather detailed socio-economic information in addition to asking physicians about their views on reimbursement and public health concerns.

DATA YEARS: 1987, 1989, 1990

SURVEY ELEMENTS: Physician/Practice Characteristics - active/inactive, specialty, age, gender, FMG status, urban/rural, location, practice setting

Productivity - hours, allocation of hours

Practice Size - none

Practice Expenses - malpractice, bad debt, charity care, total expenses

Practice Revenues - sources of revenue

Physician Income - personal net income

Other - fees by payor type/procedure, patient demographics, types of diseases treated, public health concerns unique to location, expected impacts of RBRVS, percent of patients that are uninsured, physicians' views on health policy issues, laboratory ownership

RESPONSE RATE: Unknown

ACCESSIBILITY: Data are generally not available to the public except in published, aggregate form. Any additional requests must be made in writing.

CONTACT: Karen Batory
Director
Health Care Delivery Department
Texas Medical Association
401 West 15th Street
Austin, Texas 78701-1680
(512) 370-1405

REFERENCES: None

ABSTRACT # 30: *Annual Survey of the Total Compensation of Physician Employees*

SPONSOR: William M. Mercer, Inc.

DESCRIPTION: An annual, national survey of institutions that employ physicians. Questionnaires were mailed to about 900 institutions in Mercer, Inc. listings. Eligible organizations were ones that employed physicians or physician consultants. Organizations ranged from group practices to hospitals and HMOs. The completed dataset contained information for 73 institutions representing 4,700 physicians. The goal of the survey is to provide institutions with baseline estimates of physician compensation.

DATA YEARS: 1988, 1989

SURVEY ELEMENTS: Physician/Practice Characteristics - specialty, urban/rural, region, Medicare participation, multispecialty group, university affiliation
Productivity - total hours
Practice Size - none
Practice Expenses - wages, total operating expenses
Practice Revenues - operating revenue
Physician Income - compensation, other cash compensation
Other - none

RESPONSE RATE: Less than 10%

ACCESSIBILITY: Data are available in aggregate form. Special tabulations and/or data tapes must be requested in writing.

CONTACT: Kimberly A. Mobley
National Physician Compensation Survey Director
William M. Mercer, Inc.
400 Renaissance Center
Suite 1100
Detroit, MI 48243
(313) 259-1094

REFERENCES: Second Annual Survey of the Total Compensation of U.S. Physician Employees, Mercer Inc., 1991.

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